

## **Aquatic Animals Commission January 2005 Report Meeting rationale for the proposed revision of the Chapter “List of Diseases”**

### **Revision of the list of diseases (Chapter 1.1.3.)**

The Commission considered Member Countries’ comments on its suggested changes to the list of diseases, and appreciated the effort to which some Member Countries had gone to, at very short notice, to provide justification of their views. The Commission accepted some of the comments and made appropriate changes.

The Commission accepted Australia’s concerns that the report of the Bureau meeting was unclear and that it did not explicitly request Member Countries’ comments or evaluations of the recommendations of the *ad hoc* teams and appeared to seek comments only on the resulting list of diseases proposed by the Commission.

The Commission did not agree with Australia that only peer-reviewed journals should be used as a source of information for its work but considers it most efficient to use many sources, including OIE Reference Laboratories, other international experts, and the outcomes of international conferences of experts, in developing and improving its standards. This approach is especially applicable in addressing emerging diseases. All OIE Commissions operate in this fashion.

Addressing New Zealand’s comments, the Commission responded that, in line with their terms of reference, the *ad hoc* teams had initially assessed each currently listed disease but had then provided a detailed assessment only for those diseases identified as candidates for de-listing or addition.

For some of the crustacean diseases suggested for addition to the list, the Commission will apply the concept of ‘listing as an emerging disease’ if this concept is adopted by Member Countries (see Agenda item 4.1.3).

The Commission is concerned to ensure that all Member Countries understand the purpose of the OIE list of aquatic diseases. The Commission stresses that the primary purpose of listing a disease is for the OIE to collate and disseminate information on the occurrence and control of that disease world-wide. It is not the case that diseases proposed for de-listing are considered to be of no importance to some Member Countries; rather, diseases proposed for de-listing are considered not to meet the listing criteria agreed by Member Countries. Member Countries may still impose import restrictions addressing those diseases if this is justified on the basis of a science based import risk analysis and on their animal health situation.

The rationale for retention, removal or addition of diseases is given below for each of the diseases assessed; the proposed revised list is given in “List of Diseases”. Those individuals not in agreement with those assessments are invited to provide their own assessment.

## Fish diseases

### Epizootic haematopoietic necrosis (EHN)

New Zealand commented that EHN did not seem to meet the listing criteria and provided scientific reasons to support their view. The Commission referred the New Zealand comments to the OIE Reference Laboratory for EHN, which disagreed with some of the New Zealand arguments. As a result, the Commission recommends the retention of EHN on the list.

### Infectious haematopoietic necrosis (IHN)

Dissenting views were not received. The Commission recommends the retention of IHN on the list.

### *Oncorhynchus masou* virus disease (OMVD)

Dissenting views were not received. The Commission recommends the removal of OMVD from the list.

### Spring viraemia of carp (SVC)

Dissenting views were not received. The Commission recommends the retention of SVC on the list.

### Viral haemorrhagic septicaemia (VHS)

The USA suggested the Commission consider de-listing certain strains of listed disease agents that have a world-wide distribution and cause little mortality, such as marine strains of VHS. The Commission had sought advice from the OIE Reference Laboratory for VHS, which recommended that it would be premature to do so because methods for reliable differentiation of such strains from the virulent strains of VHS had not been sufficiently developed at this stage. Until better techniques to distinguish between pathogenic and non-pathogenic strains are developed, the Commission takes the view that it would be impractical to make such a differentiation. However, the Commission agrees that it is important to keep this issue under review. The Commission recommends the retention of VHS as described in the *Manual of Diagnostic Tests for Aquatic Animals* (hereafter referred to as the *Aquatic Manual*).

### Channel catfish virus disease (CCVD)

Dissenting views were not received. The Commission recommends the removal of CCVD from the list.

### Viral encephalopathy and retinopathy (VER)

Australia and Norway pointed out some inconsistency in the reasoning for criteria being met or not. The Commission, whilst accepting these comments, concluded that they did not change the overall assessment that VER does not meet the required criteria for listing. The Commission recommends the removal of VER from the list.

#### Infectious pancreatic necrosis (IPN)

The EU reiterated its comment on the report of the October 2003 meeting of the Commission regarding its claim that IPN did comply with listing criteria 2 and 7, and provided scientific justification to support its view. The Commission will refer the EU assessment to the OIE Reference Laboratory for IPN and to the fish team of the *ad hoc* Group, for their opinion for consideration by the Bureau of the Commission in early May 2005, at which time a final recommendation will be prepared for presentation at the General Session.

#### Infectious salmon anaemia (ISA)

Dissenting views were not received. The Commission recommends the retention of ISA on the list.

#### Epizootic ulcerative syndrome (EUS)

Dissenting views were not received. The Commission recommends the retention of EUS on the list.

#### Bacterial kidney disease (*Renibacterium salmoninarum*)

The EU reiterated its comment on the report of the October 2003 meeting of the Commission regarding its claim that BKD did comply with listing criteria 1, 2 and 7, and provided scientific justification to support its view. The Commission will refer the EU assessment to the OIE Reference Laboratory for BKD and to the fish team of the *ad hoc* Group, for their opinion in time for consideration by the Bureau of the Commission in early May 2005, at which time a final recommendation will be prepared for presentation at the General Session.

#### Enteric septicaemia of catfish (*Edwardsiella ictaluri*) (ESC)

Dissenting views were not received. The Commission recommends the removal of ESC from the list.

#### Piscirickettsiosis (*Piscirickettsia salmonis*)

Dissenting views were not received. The Commission recommends the removal of *Piscirickettsiosis* from the list.

#### Gyrodactylosis (*Gyrodactylus salaris*)

Dissenting views were not received. The Commission recommends the retention of gyrodactylosis on the list.

#### Red sea bream iridoviral disease (RSIVD)

Dissenting views were not received. The Commission recommends the retention of RSIVD on the list.

#### White sturgeon iridoviral disease (WSIVD)

Dissenting views were not received. The Commission recommends the removal of WSIVD from the list.

## Koi herpes virus (KHV)

The EU, supported by Norway, invited the Commission to evaluate the EU's assessment for listing koi herpes virus. The assessment was referred for evaluation to the fish team of the *ad hoc* Group, which agreed that many of the criteria for listing a disease by the OIE are met. However, further clarification on some aspects of the assessment is needed. The Commission therefore seeks Member Countries' comments on the EU assessment (see page 166 of EU comments:

[http://europa.eu.int/comm/food/international/organisations/ah\\_pcad\\_oie13\\_en.pdf](http://europa.eu.int/comm/food/international/organisations/ah_pcad_oie13_en.pdf)) as well the comments from the fish team of the *ad hoc* Group (see [Appendix VI](#)). These will be considered by the Bureau of the Commission in early May 2005, at which time a final recommendation will be prepared for presentation at the General Session.

## Mollusc diseases

### Infection with *Bonamia ostreae*

Dissenting views were not received. The Commission recommends the retention of Infection with *Bonamia ostreae* on the list.

### Infection with *Bonamia* ~~*exitiosus*~~ *exitiosa*

Dissenting views were not received. The Commission recommends the retention of Infection with *Bonamia* *exitiosa* on the list.

### Infection with *Mikrocytos roughleyi*

Dissenting views were not received. The Commission recommends the removal of Infection with *Mikrocytos roughleyi* from the list.

### Infection with *Haplosporidium nelsoni*

Dissenting views were not received. The Commission recommends the removal of Infection with *Haplosporidium nelsoni* from the list.

### Infection with *Marteilia refringens*

Dissenting views were not received. The Commission recommends the retention of Infection with *Marteilia refringens* on the list.

### Infection with *Marteilia sydneyi*

Dissenting views were not received. The Commission recommends the removal of Infection with *Marteilia sydneyi* from the list.

### Infection with *Mikrocytos mackini*

The EU suggested that *Mikrocytos mackini* be retained; however, no justification was provided. The Commission recommends the removal of Infection with *Mikrocytos mackini* from the list.

### Infection with *Perkinsus marinus*

Dissenting views were not received. The Commission recommends the retention of Infection with *Perkinsus marinus* on the list.

*Perkinsus olseni*/~~*atlanticus*~~

Italy and the EU, supported by Norway, provided an assessment concluding that Infection with *Perkinsus olseni* should be de-listed because criterion 7 is not met. The Commission disagreed. The Commission also noted Australia's concerns regarding criteria 1 and 4, but concluded that these concerns do not influence the outcome of the assessment. The Commission recommends the retention of Infection with *Perkinsus olseni* on the list.

In addition, the Commission considers it timely to delete "*atlanticus*" from the name of the agent so that the disease now reads: "Infection with *Perkinsus olseni*". Member Countries are reminded that the two species names were listed in parallel for an interim period to show that they are synonymous.

Infection with *Haplosporidium costale*

Dissenting views were not received. The Commission recommends the removal of Infection with *Haplosporidium costale* from the list.

Infection with ~~Candidatus~~ *Xenohalictis californiensis*

Dissenting views were not received. The Commission recommends the retention of Infection with *Candidatus Xenohalictis californiensis* on the list. In addition, the Commission considers it timely to delete "candidatus" from the name of the agent so that the disease now reads: "infection with *Xenohalictis californiensis*" to comply with the usual taxonomy (genus and species).

Crustacean diseases

Taura syndrome (TS)

Dissenting views were not received. The Commission recommends the retention of TS on the list.

White spot disease (WSD)

Dissenting views were not received. The Commission recommends the retention of WSD on the list.

Yellowhead disease (YHD)

Dissenting views were not received. The Commission recommends the retention of YHD on the list.

Tetrahedral baculovirus (*Baculovirus penaei*)

Dissenting views were not received. The Commission recommends the retention of Tetrahedral baculovirus (*Baculovirus penaei*) on the list.

Spherical baculovirus (*Penaeus monodon*-type baculovirus)

Dissenting views were not received. The Commission recommends the retention of Spherical baculovirus (*Penaeus monodon*-type baculovirus) on the list.

Infectious hypodermal and haematopoietic necrosis (IHHN)

Dissenting views were not received. The Commission recommends the retention of IHHN on the list.

Crayfish plague (*Aphanomyces astaci*)

Dissenting views were not received. The Commission recommends the retention of Crayfish plague (*Aphanomyces astaci*) on the list.

Spawner-isolated mortality virus disease (SMVD)

Dissenting views were not received. The Commission recommends the removal of SMVD from the list.

#### Necrotising hepatopancreatitis (NHP)

Australia questioned the proposed listing of NHP in relation to criteria 4 and 8. The Commission disagreed because several robust diagnostic tests are available for confirmation of presumptive infections. The EU, supported by Norway, expressed concerns regarding criteria 1, 6 and 7. Regarding criterion 1, the Commission reiterates that control of NHP with medicated feeds is not always effective. Regarding criterion 6, the Commission noted that absence of evidence of transmission of disease (e.g. to Asian countries) is likely due to environmental conditions in those countries not being conducive to clinical expression, in contrast to disease outbreaks where conditions are conducive to clinical expression. Regarding criterion 7, the Commission considers that NHP has never been officially reported outside the Americas. The Commission recommends the addition of NHP to the list.

#### Infection with Mourilyan virus (MoV)

The Commission agrees with the EU (supported by Norway) and Australian comments that MoV may not fully meet criteria 4 or 5. Therefore, the Commission does not recommend the listing of MoV at this time.

The Commission may consider MoV as a candidate for listing as an emerging disease. (See Item 4.1.3.)

#### Infectious myonecrosis (IMN)

The EU (supported by Norway) expressed the opinion that IMN fails to meet criterion 7. The Commission concluded that given the very limited geographical distribution (confined to parts of one country) of IMN, this disease does meet criterion 7; many countries with susceptible species could declare freedom on the basis of historical freedom as outlined in Chapter 1.1.4. of the *Aquatic Manual*. The Commission agrees with Australia on the need for confirmatory test methods when diagnosis is made using histological methods, and notes that molecular tests are available for confirmatory testing. The Commission recommends the addition of IMN to the list.

#### White tail disease (WTD)

The Commission agrees with Australia that WTD may not fully meet criterion 4. Therefore, the Commission does not recommend the listing of WTD at this time.

The Commission may consider WTD for listing as an emerging disease. (See Item 4.1.3.)

#### Infection with hepatopancreatic parvovirus (HPV)

The Commission agrees with EU (supported by Norway) and Australian comments that HPV may not fully meet criteria 1 and 8. Therefore, the Commission does not recommend the listing of HPV at this time.

The Commission may consider HPV as a candidate for listing as an emerging disease. (See Item 4.1.3.)